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BECAUSE BEING ABLE TO AGE IN PLACE

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Retirement Dreams – or Nightmares

In praise of baseball's delightfully slow dance – chatting inning to inning



By Steven V. Dubin

Baseball leaves plenty of time for conversation and catching up.

My Pinnacle Network, with three Eastern Massachusetts business-to-business groups that meet via Zoom each month, chose to slow down the networking process by holding a special “Slow Networking” event at a recent Worcester Red Sox Game. Added bonus, the Sox were playing the Toledo Mudhens. Klinger would approve.

The theory was to spend one inning with a new person. Participants were supplied with lot of questions to keep the conversation lively? Example: “As a businessperson, how do you view the scoreboard? Is it annual income? Number of employees? Adding another location?”

Ahhh. Baseball and human interaction.

In a world where everything seems to happen at the speed of a microwave countdown, minor league baseball remains a stubborn, wonderful holdout. It is the tortoise among hares, the handwritten letter among text messages, the front porch rocking chair in a universe of high-speed treadmills.

Baseball does not rush.

Unlike sports that resemble organized stampedes, baseball unfolds like a leisurely summer afternoon. There are pauses. There are conversations. There are moments when absolutely nothing appears to be happening – until suddenly, everything is.

The pitcher adjusts his cap. The batter taps the plate. The catcher flashes mysterious hand signals that look suspiciously like a secret code for ordering lunch. The crowd settles in. Anticipation builds.

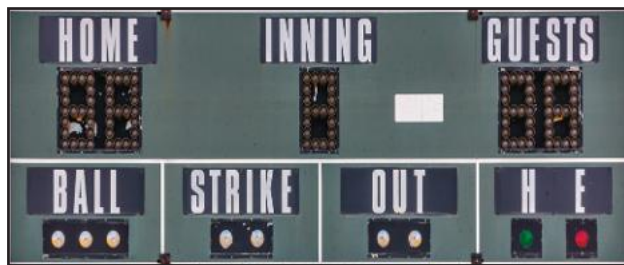
Then, with one pitch, the entire story changes.

Fans have time to discuss strategy, statistics, weather forecasts, family history, and occasionally the game itself.

The slow pace is not a flaw. It is a feature.

The crack of a wooden bat. The perfectly manicured grass. The hopeful optimism that arrives every spring, convincing fans that this is finally their year. Baseball invites us to savor moments rather than race through them.

Even the numbers tell stories. A .300 batting average is celebrated because failure is ex-



pected. A player who succeeds three times out of 10 is considered exceptional. Imagine if airlines adopted that standard.

“Good news, folks. We landed safely three out of our last 10 flights!”

Fortunately, baseball's standards apply only on the diamond.

There is also something wonderfully democratic about the sport. Superstars and role players share the field. A rookie can become a hero. A veteran can enjoy a comeback. A little bloop single can be just as valuable as a towering home run.

And let's not forget the ballpark itself, a magical gathering place where generations connect. Grandparents explain scorecards. Parents share traditions. Kids chase foul balls with the determination of gold prospectors.

For three hours or so, the outside world fades away.

The slow rhythm encourages something increasingly rare: paying attention.

Baseball asks us to watch, wait, and wonder. What will happen next? Will the runner steal? Will the pitcher escape the jam? Will the hot dog vendor finally make it to our section before the inning ends?

These small uncertainties create the sport's unique charm.

In many ways, baseball mirrors life. There are long stretches of routine interrupted by moments of excitement. Patience matters. Preparation matters. And sometimes, despite doing everything right, things simply don't bounce your way.

Yet tomorrow brings another game.

Perhaps that's why baseball endures. It reminds us that not everything worthwhile needs to happen quickly.

Sometimes the greatest pleasures arrive one pitch at a time.

I look forward to hearing from you! Please email me at SDubin@PRWorkZone.com.

About the Author: *Steven V. Dubin is the founder of PR Works, a lightly used public relations firm based in Plymouth which helps small to mid-sized nonprofit organizations and for-profit companies navigate the overwhelming options of advertising. Steve lives in Plymouth with his wife, Wendy. He is a contributing author to “Get Slightly Famous” and “Tricks of the Trade,” the complete guide to succeeding in the advice business. He recently authored “PR 101,” an E-book. ∞*



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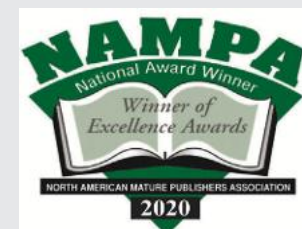
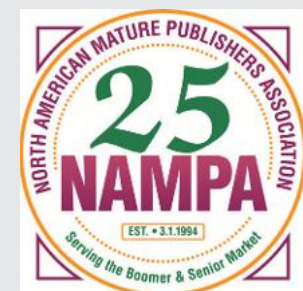
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Privilege, obligation, burden, and trauma: The hidden journey of family caregiving

By Mark Friedman with contributions from
Dr. Tara Kfoury and Bob Stephen



Part one of two

These words often define the experience of caring for an aging parent: privilege, obligation, burden, and trauma.

Privilege is the opportunity to do something meaningful for someone we love. It reflects grati-

tude, connection, and the desire to give back.

Obligation is a duty or responsibility that arises from personal ethics, conscience, or a sense of right and wrong.

Burden emerges when the demands of caregiving begin to exceed the time, energy, financial resources, and emotional reserves available to meet them.

Trauma develops when prolonged stress, uncertainty, fear, loss, and repeated crises overwhelm a person's ability to cope.

Most family caregivers experience all of these at some point in their caregiver journey. Most enter from either a sense of obligation (56% of caregivers), meaning there is no one else and it has to be done, or privilege (44% of caregivers), meaning I can and I am willing. Regardless, at some point the positioning evolves into something more encompassing.

Whether entering through the door of obligation or privilege, caring for an aging loved one can be one of life's most meaningful responsibilities. Few people regret spending time helping the people who raised them. The challenge is that caregiving rarely stays the same. Needs increase gradually. One doctor's appointment becomes several. A medication reminder becomes medication management. A minor fall becomes a trip to the emergency room. A quick daily check-in becomes a constant concern.

What begins as an act of love can slowly become a source of exhaustion.

The progression is often so gradual that caregivers fail to recognize how much their lives have changed until they are already overwhelmed.

Family caregiving has become one of the largest invisible forces affecting the American workforce. Bob Stephen relates that according to the 2025 AARP/National Alliance for Caregiving report "Caregiving in the U.S.," nearly 59 million Americans provide care to an adult family member or friend, and more than 60% of those

caregivers are employed. Millions of people begin each workday carrying two full-time jobs: the one that pays them and the one that waits for them when they leave the office.

Research consistently shows that caregiving affects workplace performance. Employees adjust schedules, reduce hours, turn down promotions, take leaves of absence, and sometimes leave the workforce altogether. Calls from physicians interrupt meetings. Lunch breaks become opportunities to coordinate transportation, refill prescriptions, or speak with insurance companies. Vacation days become caregiving days.

According to Dr. Tara Kfoury, a leading Boston-area expert in trauma, "Being a full-time employee and/or a stay-at-home parent while acting as a caretaker can lead to physical, emotional, and mental exhaustion. It is important to highlight that the ongoing demands of caring for a chronically ill, disabled, or aging loved one can have significant burnout effects on not only the caregiver, but also the caretaker's immediate family members."

The financial impact can be equally significant.

Many caregivers spend thousands of dollars each year on transportation, home modifications, medical supplies, supplemental care, and services that help an older parent remain at home. Others sacrifice career advancement opportunities or reduce work hours to accommodate increasing demands. National research shows that roughly half of caregivers experience negative financial consequences from caregiving, and many take on debt to help support a loved one. Per Stephen, as of 2020, those who spent their own money were contributing 25% of their income to care. This means sacrificing their own savings, reducing expenses including their healthcare, and even putting themselves in financial peril, with more than eight million unable to afford basics like food or housing. [AARP Out-of-Pocket Cost Survey, 2020, and Caregiving in the U.S. 2025]

The emotional toll often receives less attention. Relationships become strained. Exercise routines disappear. Sleep becomes fragmented. Social lives shrink. Caregivers begin to neglect their own health while focusing on someone else's. Over time, their world becomes smaller. Says Kfoury, "This causes emotional burnout and happens when a caregiver devotes the majority of their time, energy and resources to taking care of their loved one. With a stretched emotional and physical bandwidth, they begin



to neglect, forget or aren't able to take care of him/herself. A direct causation of not caring for this physical, emotional and mental health can severely impact the way the caregiver feels, acts and directly impacts their ability to complete their personal responsibilities."

Many people do not think of caregiving as a trauma experience, yet the similarities are striking. Unlike a single traumatic event, caregiving often involves years of chronic stress. Caregivers live with uncertainty. They witness physical and cognitive decline. They navigate difficult conversations about safety, independence, finances, healthcare decisions, and end-of-life wishes.

Many describe feeling as though they are always waiting for the next phone call. The next fall. The next hospitalization. The next crisis.

Researchers have linked prolonged caregiver stress to higher rates of anxiety, depression, emotional exhaustion, burnout, and declining quality of life. Dementia caregivers are especially vulnerable because the demands often intensify over time while the emotional losses accumulate long before a loved one is physically gone. Dr. Kfoury says: "Caretakers for loved ones with dementia often experience a unique form of grief called anticipatory grief. Though the demands of their loved one's care often intensify over time, the caretaker experiences losing the loved one they once knew. Each day that passes, the caretaker is forced to grieve the loss of their loved one while he/she is still present while also continuing to provide daily physical, emotional, and medical support."

These pressures frequently appear in ways that are easy to miss.

- Difficulty concentrating
- Persistent worry
- Sleep disruption
- Emotional fatigue
- Reduced resilience

• A feeling that no matter how much is done, it is never enough

Working caregivers experience another challenge known as presenteeism. They show up for work, but part of their attention remains focused elsewhere. They are thinking about a parent who lives alone, a medication that needs

Navigating the Future... continued on p.14

Are popular weight-loss medications about to become more affordable?

By Patricia Prewitt, My Personal Rx Adviser



The biggest challenge with GLP-1 medications has not been finding out about them – it has been finding a way to afford them. Popular medicines such as Wegovy, Ozempic, and Zepbound have helped many people manage diabetes and obesity, but monthly costs have often exceeded \$1,000 when not covered by a prescription insurance plan.

What is changing?

The good news is several new programs and lower-cost options are having an impact on patients' out-of-pocket costs. Competition between the GLP-1 manufacturers is putting downward pressure on prices. The newer direct-to-consumer programs that bypass traditional prescription insurance processing can make these products less costly to a patient.

What are direct-to-consumer programs?

Drug manufacturers are increasingly offering direct programs that bypass the traditional pharmacy benefit system. These programs allow eligible patients to purchase medications at discounted cash prices, often substantially below the price when using an Rx insurance benefit.

What is the new Medicare GLP-1 Bridge Program for Medicare enrollees?

Beginning July 1, 2026, the Centers for Medicare and Medicaid Services (CMS) will allow participating companies to provide products at reduced net prices with copays as low as \$50 a month. Currently, those products are for specific doses of Wegovy, Zepbound, and the newly approved oral product Foundayo. Starting doses of the new pill form, which avoids the injectable delivery system, may be available for around \$150 per month, with higher doses costing more.

How would someone qualify for the program?

There continue to be medical criteria and qualifications for GLP-1 weight-loss medications. According to the CMS, your doctor will be required to submit documents for participation. Additionally there is a

prior authorization requirement.

Would Bridge Program costs be applied to my insurance deductibles?

No. According to CMS, no part of the program costs is applied to an eligible beneficiary's gross covered prescription benefit, and no part of the \$50 copay would count toward the true out-of-pocket (TROOP) costs. It is not yet clear if those costs will be allowed by the US tax code for medical expenses. Details of the program may be found here: <https://www.cms.gov/medicare/coverage/prescription-drug-coverage/medicare-glp-1-bridge>

Are direct-to-consumer programs only for the newer weight-loss products?

Prior to 2026, only a few companies offered a direct-to-patient pricing portal for traditional office-based physicians to use to help patients obtain patented brand name prescriptions directly, bypassing traditional drug stores. The GLP-1 companies are among the first to create a direct connection to a traditional office-based prescriber. There are many telehealth internet platforms that offer prescription products and lifestyle medications via a website. A medical consultation takes place with a licensed telehealth prescriber to verify the condition and need for the prescription. The patient pays via credit card.

What else?

Consumers should remember that the lowest price is not always found at the local pharmacy. Prices can vary depending on insurance coverage, manufacturer programs, and cash-payment options. Be cautious about advertisements for compounded or copycat versions that are not FDA approved. Links are all over the internet and social media platforms. It is advisable to be sure you are interacting with a legitimate company or portal before releasing personal medical information or using a credit card.

The bottom line is encouraging

Expanded coverage options are creating more paths to affordable treatment. For patients for whom these medications were financially out of reach, the next few years might bring lower costs. Consumers should always discuss treatment choice with their healthcare provider and compare all pricing options before making a decision.

Content provided is for educational purposes only and is not intended as a substitute for advice from a qualified medical professional. The opinions expressed within are those of the author.

About the Author: Patricia Prewitt is a local Massachusetts resident who spent more than 30 years in the pharmaceutical industry. Tricia is a consumer education advocate, and loves helping people find ways to save money on their prescriptions. More information and free resources are available on her website at <https://mypersonalrxadviser.com/resources> or call her at 508-507-8840. Favorite Quote: "Act as if what you do makes a difference. It does." – William James ∞



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Personalized care plans allow seniors to remain safe and comfortable in their own homes

By Maria Burke, RN, Founder and CEO, Celtic Angels Home Health Care



Q: What is Celtic Angels Home Health Care?

A: Celtic Angels Home Health Care is a locally owned and operated agency providing compassionate, personalized care to seniors

and adults who wish to remain safe and comfortably in their own homes. With offices serving the MetroWest and South Shore communities, Celtic Angels offers customized care plans designed to meet each client's unique needs.

Q: What services do you provide?

A: Our highly trained caregivers assist with RN Case Management, personal care, companionship, meal preparation, medication reminders, light housekeeping, and specialized support for individuals living with Alzheimer's disease, dementia, Parkinson's disease, and other chronic conditions.

Q: How do families know when it's time to consider home care?

A: Common signs include difficulty managing daily activities, forgetfulness, increased falls, missed medications, isolation, or family caregivers feeling overwhelmed. Home care can provide support before a crisis occurs, helping individuals maintain their independence and quality of life.

Q: Can care be customized?

A: Absolutely. Whether a client needs just a few hours of companionship each week or full care assistance, we tailor our services to fit their lifestyle, preferences, and health needs.

Q: What makes Celtic Angels different?

A: We believe exceptional care begins with exceptional caregivers. Our team is carefully screened, trained, and matched with clients based on personality, interests, and care requirements. We've won multiple awards and were recognized as one of The Boston Globe's Top Places to Work, reflecting our commitment to both our clients and our caregivers.

Q: How can families learn more?

A: We offer complimentary consultations to discuss care options and answer questions. Our goal is to provide peace of mind for families and compassionate support for those they love.

About Celtic Angels Inc.: Celtic Angels Inc. is a trusted provider of high-quality, in-home care services across Massachusetts. Founded and led by



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SENIOR FITNESS

Improving health through exercise: The physical and mental strength of a cancer survivor's journey

By Rita La Rosa Loud, B.S.



Research strongly supports regular exercise during and after cancer treatment to help manage side effects, rebuild strength and stamina, and lower the risk of recurrence. Yet fewer than

30% of U.S. cancer survivors exercise regularly.

Introducing Michelle

As a fellow survivor, I'm honored to introduce Michelle Geraghty, a wife, mother, grandmother, retired nurse, and breast cancer survivor. Her fitness journey began at age 69 when she joined our inclusive program, which combines resistance training, endurance exercise, stretching, and functional movement.

Before enrolling, Michelle had tried Zumba and dance aerobics. She was looking for a program that would help her improve her balance and build muscle strength.

Diagnosis and response

In August 2024, a month after joining the fitness program, Michelle was unexpectedly diagnosed with breast cancer. She met the news with amazing strength: "When I first found out I had breast cancer, I wasn't shocked, angry or even sad." Her nurse explained that she had triple-negative cancer in her right breast and ductal carcinoma in her left. Michelle joked, "I'm an over-achiever," and remained determined to keep negative thoughts at bay.

She began chemotherapy on October 22 and, with her oncologist's blessing, continued exercising through the first three months of treatment. "Exercise made me feel I was doing something for myself. It helped me cope with the chemo," she said. "My wonderful class

members were extremely supportive and encouraging. I had more energy, enjoyed it, felt good after class, and looked forward to coming."

Nutrition and exercise during treatment

Before starting the exercise program, Michelle had already lost weight through a nutrition plan. As her activity level plummeted during treatment, she worried the weight would return. Instead, strength training helped her build lean muscle; at her trainer's suggestion, increased the protein in her diet to help counter muscle loss – especially during the second round of chemotherapy, when forced to pause the program temporarily. "I got valuable guidance on meeting my protein needs, planning healthy meals, using proper exercise form, stretching effectively, and safely increasing weights while recovering from surgery," she said.

Returning to fitness after radiation

After completing treatment, lumpectomy surgery, and six weeks of daily radiation in April, Michelle returned to class in June 2025. "I was concerned it would be like starting from scratch," she said. To her surprise, her energy, endurance, and strength returned to previous levels within three weeks. She now enjoys attending her grandchildren's basketball games, helping them prepare for college, and traveling to New York to be with family, something she credits exercise with making possible.

In July 2026, Michelle will celebrate one year cancer-free. "I hope to encourage others on their cancer journey and show that doing something positive, like exercise, can make a lasting difference," she said. "This program kept me strong – physically and mentally."

The Wayne Westcott, Ph.D. Center for Health and Fitness at Quincy College adult group fitness program includes resistance training, cardiovascular exercise, stretching, balance,



Michelle Geraghty, cancer survivor.

and functional movements. We are located at Presidents Place, 1250 Hancock St., Quincy. Call 617-405-5978 to tour, inquire about complimentary training and obtain registration procedures. Street parking is available; a parking garage is next to the building.

About the Author: Rita La Rosa Loud holds a B.S. in Exercise Physiology with additional education in Sports Medicine and Athletic Training. She is NASM Certified and has been actively involved in the fitness industry for more than 35 years. She is also an author and writes fitness-related articles for various publications. Currently, she is a fitness researcher and directs the Wayne Westcott, Ph.D. Center for Health and Fitness at Quincy College. She can be reached at 617-405-5978 or by email at Rita.larosaloud@quincycollege.edu. ∞

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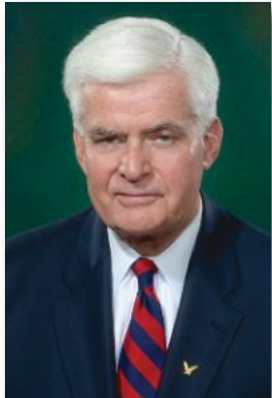
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HOME EQUITY WEALTH MANAGEMENT

Why home equity deserves objective consideration in serious retirement advice



By George A. Downey

Financial planning has changed. Advisors can no longer view a client's financial life only through investment accounts, insurance products, income projections, or tax strategies. A sound fiduciary process requires a broader and more complete review of the client's relevant circumstances, needs, objectives, and assets.

At its core, fiduciary duty means acting in the client's best interest. For investment advisers, this includes both a duty of care and a duty of loyalty.

In plain language, the advisor must understand the client's situation, make recommendations that are reasonable, avoid or disclose conflicts, and place the client's interest ahead of the advisor's own. CFP professionals are also required to act as fiduciaries when providing financial advice.

That obligation has an important practical meaning: major assets should not be overlooked simply because they fall outside the advisor's traditional investment management process. For many older homeowners, home equity is one of the largest assets they own. It may equal or exceed the value of retirement accounts. Yet housing wealth is often ignored because it is illiquid, emotionally sensitive, or viewed as separate from financial planning.

Ignoring home equity may be convenient, but it can leave the plan incomplete. A thorough planning process should consider all relevant assets that may affect retirement income, portfolio withdrawals, tax exposure, long-term care needs, survivor protection, cash flow, debt management, and legacy goals. For homeowners, the residence and its equity are part of that picture.

This does not mean home equity should always be used. It also does

not mean an advisor should routinely recommend a reverse mortgage, home equity line of credit, refinancing, sale, or downsizing. In many cases, the right conclusion may be to preserve the home equity and take no action. The fiduciary question is more basic: was the asset objectively considered, were the advantages and disadvantages reviewed, and was the conclusion documented?

This issue becomes more important as clients live longer, health care costs rise, markets become volatile, and retirement income plans face stress. If a client later experiences avoidable financial pressure, clients, family members, regulators, or compliance departments may ask whether a major available resource was ever evaluated. The risk may not be that the advisor selected the wrong strategy. The greater concern may be that no meaningful analysis occurred.

Home equity should therefore be treated as a planning asset, not merely as a mortgage product opportunity. The advisor's role is to help the client make an informed decision using all relevant information. That review should include costs, risks, client preferences, family considerations, tax and estate implications, and available alternatives.

The best fiduciary process is not product driven – it is planning driven. For older homeowners, excluding housing wealth may leave out a material part of the client's financial security. A simple standard should guide the process: if an asset is relevant to the client's best outcome, it deserves consideration. For many clients, home equity may be the missing asset that determines whether a plan is merely adequate, or truly in the client's best interest.

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A faster and more convenient way for you to request a Social Security number and card

By Delia De Mello, Social Security



If you need an original Social Security number (SSN) or a replacement card, you can now complete your request online, and if needed, schedule an appointment for faster service.

How it works

When you visit our Social Security number and card page at www.ssa.gov/number-card, we'll ask you a few questions to determine the best way for you to apply.

We will walk you through each step of the application process.

After you submit your online application, we will either process it online or guide you to schedule an appointment to visit your local Social Security office or card center and complete the process.

By starting the application online, your

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For more helpful information, check out our publications, *Your Social Security Number and Card*, at www.ssa.gov/pubs/EN-05-10002.pdf.

About the Author: *Delia DeMello, metropolitan public affairs specialist, has been with the Social Security Administration since 1986. For information, call 800-772-1213 or visit www.socialsecurity.gov*



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Targeted support programs help older adults and people with disabilities maintain independence



By Nicole Long, MSW, LICSW
CEO of Old Colony Elder Services

Maintaining and celebrating independence as we age

As we celebrate Independence Day on July 4th, it also reminds us of another meaningful form of independence, one that is deeply valued across all cultures and communities, including the Cape Verdean and Asian communities, where older adults are honored for their wisdom, resilience, and important role within the family. Maintaining independence while aging is not only about remain-

ing at home safely, but also about preserving dignity, cultural connections, and quality of life.

Old Colony Elder Services (OCES) is proud to celebrate more than half a century successfully supporting the independence and dignity of older adults and individuals with disabilities through the provision of essential services and information that promotes healthy and safe living.

In fact, OCES is the largest provider of in-home and community-based services for older adults and people living with disabilities in Southeastern Massachusetts. Below are a few ways that OCES helps older adults maintain their independence.

Significant life-supporting care

OCES assists individuals to safely live within the community as independently as possible for as long as possible while preserving dignity and quality of life. OCES helps individuals, who may otherwise require nursing facility placement, remain in their homes. OCES operates several housing and home care programs that are designed to meet individuals where they are.

OCES can provide guidance regarding housing options. For adults who are unable to live alone, Adult Family Care is a program that brings people together in a shared, comfortable home environment. In the Congregate Housing program, older adults have a private bedroom, with access to kitchen and living room areas in a shared living environment. Through the Supportive Housing program, each older adult lives in a private apartment at a local housing authority site with integrated

community resources and services. Researching housing options can be overwhelming and there are many alternative housing resources that are available in addition to those mentioned. The OCES team is here to help older adults understand and navigate the available options.

In-home services, otherwise known as Home Care, help older adults live independently with dignity, while avoiding unnecessary hospitalization or long-term care placement. Services provided at home may include homemaker services to assist with housekeeping, laundry, grocery shopping, and meal preparation. Other services may include personal-care assistance with dressing, bathing, and hygiene; transportation to medical appointments; automated medication dispensing systems; home delivered meals through Meals on Wheels; and more.

OCES's care management team assesses an individual's needs, creates a personal-care plan, and coordinates support to assist with daily living activities.

Promoting connection

A great number of older adults, including many who live alone, continue to live independently in their own homes. Older adults who stay engaged in their community are less likely to experience loneliness and social isolation. It's important to connect with others. Councils on aging and adult community centers provide opportunities to socialize and stay active in the community. A wide variety of daily and weekly activities are offered, including yoga, line dancing, painting, crafts, chess, bridge, mah-jong, and more. Educational programs, social clubs, and group activities are also available, giving individuals many opportunities to stay active, engaged, and connected.

OCES supports everyone without exception and strives to empower individuals to thrive, age in place, and reach their highest potential. OCES' Information and Referral Department is the entry point to help guide you through your options.

To learn more about OCES's comprehensive programs and services, visit ocesma.org.

About the Author: Nicole Long is the Chief Executive Officer of Old Colony Elder Services (OCES). Founded in 1974, OCES is a private, non-profit organization proudly serving greater Plymouth County and surrounding communities. OCES is designated as one of 27 Aging Services Access Points (ASAPs) and Area Agencies on Aging (AAAs) in the Commonwealth of Massachusetts. OCES's mission is to support the independence and dignity of older adults and individuals with disabilities by providing essential information and services that promote healthy and safe living. The agency offers a number of programs to serve older adults, individuals with disabilities, their families and caregivers. For more information call 508-584-1561 or visit www.ocesma.org. ∞

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Aquarium releases 12 rehabilitated sea turtles into ocean waters off Cape Cod

After months undergoing rehabilitative care for life-threatening injuries at the New England Aquarium's Sea Turtle Hospital, 12 sea turtles were released on June 23 back into the waters off Cape Cod. The five Kemp's ridleys, four loggerheads, and three green sea turtles were the first group of rehabilitated sea turtles released by the aquarium this summer.

For the past seven months, staff at the aquarium's Sea Turtle Hospital in Quincy treated the hypothermic turtles for a variety of life-threatening medical conditions, including pneumonia, dehydration, and trauma. Staff veterinarians cleared the sea turtles to return to Nantucket Sound from West Dennis Beach, where the water temperature recently crossed the 65-degree threshold for the turtles to reacclimate in the ocean.

Loggerhead and Kemp's ridley sea turtles are threatened or endangered species, facing threats including climate change, ocean pollution, and degradation of their habitats. Rescue and rehabilitation efforts help to conserve these species.

Aquarium staff, volunteers, and interns have a tradition of naming the turtles receive



ing long-term care, with this year's theme being font-inspired names. Turtles released are named Kermit, Helvetica, Flipflops, Pretty Pretty Princess, Marigold, Westminster, Rage Italic, Pout, Zapfino, Verdana, Chunk, and Vivaldi.

"As we complete the first sea turtle release of the season, I'm reminded what this rescue and rehabilitation work makes possible," said Adam Kennedy, director of rescue and rehabilitation at the New England Aquarium. "We dedicate months to the turtles' recovery, and seeing them return to their ocean home off Cape Cod is the goal. This work is critical to the long-term survival of these species."

Scientists from the aquarium's research arm, the Anderson Cabot Center for Ocean Life, worked with the rescue team to tag the turtles for

post-release monitoring. The tags collect information about the turtles' behavior, habitat use, and survivorship, which helps inform sea turtle conservation and protection efforts, especially in New England where little is known about these species. This season, the team is using a combination of satellite tags for real-time data and acoustic tags for longer-term tracking; some of the turtles will be added to the aquarium's Sea Turtle Tracker for the public to follow their journey.

During the 2025 cold-stunning season, the Aquarium treated nearly 500 live sea turtles that were rescued from the shores of Cape Cod from November to December by staff and volunteers with Mass Audubon's Wellfleet Bay Wildlife Sanctuary. Getting these turtles back to full health requires a collaborative effort between biologists, veterinarians and researchers. There are 29 turtles remaining at the aquarium's Quincy center. Those will be released off Cape Cod this summer once medically cleared by aquarium veterinarians.

The New England Aquarium is a nonprofit research and conservation organization that has protected and cared for our ocean and marine animals for more than 55 years. We provide science-based solutions and help shape policies that create measurable change to address threats the ocean faces. We inspire action through discovery and help create engaged, resilient communities. ∞



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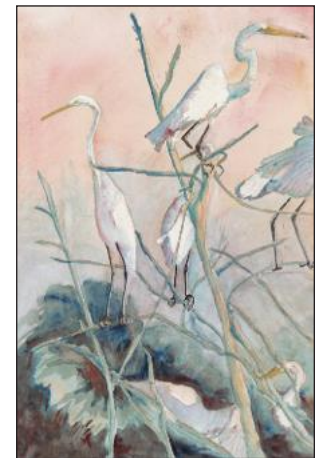
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Scituate artists' nature-themed work on display at 'Flowers & Feathers' exhibit

The Front Street Art Gallery is ushering in summer with "Flowers & Feathers," art by Janet Cornacchio and Kathleen Mullins Mogayzel.

Come visit the gallery and see their visions of flowers and feathers through July 19. And if you miss this show, they will reappear with more works in the SAA Library Gallery in Scituate Library from August 19 to September 13.

Janet Cornacchio, who focuses on watercolors with an occasional mixed-media work, particularly enjoys painting two species of birds – egrets and peacocks. Egrets with their skinny, double-curved neck and long, pointed beak, huge wingspan, and fascinating rookeries, occasionally appear in a more abstract representation.



Kathleen Mullins Mogayzel received a B.A. in art from Regis College in Weston and studied graphic arts, painting, and printmaking at several institutions. Kathleen's artistic visions begin in nature. The South Shore and South Coast tidal marshes and wildlife have been the main source of subject matter for her artistic creations – prints, oils and acrylics and mixed media. A printmaker for more than 16 years, she is currently exploring collage in more depth using printmaking with handmade papers and ephemera from nature. Combining her two loves of nature, flowers and birds, has been a joyful opportunity for Kathy. She has created artworks in various mediums of images and observations from her garden on the Herring River. ∞

Releasing the pressure: How venting can help you process your grief



By Meghan Fitzpatrick,
Hospice & Palliative Care Representative
Old Colony Hospice & Palliative Care

One of the things I have learned about grief is that sometimes you just need to vent.

There is a strange period after a loss when the casseroles have stopped coming, the sympathy cards have all arrived, and people have mostly returned to their normal routines. You are far enough from the loss that the world expects you to be doing better, but not so far from it that the loss hurts any less. In many ways, that can be one of the loneliest parts of grief. The support has faded, but the weight remains.

During one of those seasons, I had a dream that perfectly captured what that felt like.

I do not remember who I was angry at or even why I was angry. As is often the case with dreams, the details disappeared the moment I woke up. What I do remember is shouting, "I feel like a balloon that people just keep pumping air into, and if I do not let some of the pressure out, I am going to pop!"

When I woke up, I laughed at how dramatic it sounded. At the same time, I realized my sleeping brain had stumbled onto something important. That is exactly what grief can feel like. Every new responsibility, every well-meaning comment, every unexpected reminder of what you have lost adds a little more pressure. Sometimes what you need most is simply a way to let some of that air out.

We do not always give ourselves permission to do that.

Most of us have been taught that emotional reactions should be controlled and measured. We should be thoughtful with our words. We should not overreact. We should keep moving forward. There is wisdom in all of that, but grief does not always fit neatly inside those expectations. Some emotions are simply too big to be managed quietly.

The problem is that we often confuse venting with processing. They are related, but they are not the same thing.

Venting is opening the valve and letting the pressure escape. It is crying in your car. It is calling a friend and saying, "I am having a terrible day." It is pacing around your kitchen and complaining about everything that has gone wrong. Venting is not always logical, polished, or particularly insightful. It is simply honest.

Processing is different. Processing is the work that comes afterward.

Imagine someone cuts you off in traffic and suddenly you are yelling at the steering wheel. You are angry about the traffic, angry that you are running late, angry that your car was just in the shop, and angry that

apparently nobody else on the road knows how to drive. That is venting.

Processing happens later when you realize the traffic was not really the issue. You are exhausted. You are carrying too much. You have not had a chance to recover from everything that has happened, and one small inconvenience pushed you over the edge. The person who cut you off was just the spark that landed on an already overloaded system.

Both venting and processing are important. In fact, I think one often makes the other possible. Sometimes you have to get the emotions out before you can understand them. You have to release some of the pressure before you can figure out where it is coming from.

That is why trusted friends, support groups, counselors, and faith communities can be so valuable. They create space for both. They allow us to say the messy things out loud and then help us make sense of them afterward.

Grief is hard enough without expecting ourselves to carry it perfectly. Sometimes healing looks profound and insightful. Sometimes it looks like tears, frustration, and words tumbling out faster than we can organize them.

To borrow from my strange dream, some feelings are simply carrying too much air not to let a little out.

There is nothing wrong with venting. Sometimes it is exactly what keeps us from popping.

About the Author: Meghan Fitzpatrick is a business development representative at Old Colony Hospice & Palliative Care. She has a strong background in assisted living and dementia care. She is also a trained support group facilitator for the Alzheimer's Association. Her compassion and knowledge make her a vital part of Old Colony Hospice's outreach efforts. She is a trusted resource in the community, connecting with families, providers, and community partners throughout the region and can be reached at mfitzpatrick@oldcolonyhospice.com. ∞



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Independence isn't about doing it alone – it's about living the life you choose



**By Michelle Sonia,
President and CEO
Seniors Helping Seniors
Boston South Shore**

As we celebrate Independence Day this month, Americans across the country will gather with family and friends to

commemorate the ideals of freedom, resilience, and community that have defined our nation for 250 years. With America preparing to mark its 250th birthday, it is an appropriate time to reflect on what independence means – not only for our country, but also for ourselves.

For many older adults, independence means remaining in the homes and communities they love, maintaining familiar routines, and continuing to make their own decisions. It means preserving dignity, purpose, and the ability to live life on their own terms. But independence has never meant doing everything alone.

From the earliest days of our nation, Americans have relied on one another. Communities were built through neighbors helping neighbors, families supporting one another, and citizens working together for the common good. Independence and interdependence have always gone hand in hand.

The same is true as we age.

Accepting help with transportation, meal preparation, household tasks, or companionship does not mean giving up independence. In fact, receiving a little support often makes it possible to maintain independence longer. Having someone lend a hand can help prevent falls, reduce social isolation, provide peace of mind to family members, and allow older adults to continue enjoying the activities and relationships that bring meaning to their lives.

Many families struggle with the idea of asking for help. Adult children worry they are overstepping, while older adults fear becoming a burden or losing control. Yet some of the strongest and most independent people recognize that everyone needs support from time to time.

As we honor the spirit of July 4th and celebrate our nation's 250th anniversary, perhaps we can redefine independence not as self-reliance at all costs, but as the freedom to live safely, purposefully, and with the support needed to thrive.

After all, independence isn't about doing everything yourself. It's about having the freedom to live the life you choose – and knowing that none of us has to do it alone.

Happy Independence Day, and here's to celebrating America's 250 years of strength, com-

munity, and the enduring belief that we are stronger together.

About the Author: Michelle Sonia is the president and CEO of Seniors Helping Seniors Boston South Shore. Michelle grew up in Hanson and

lives in Weymouth. She was valedictorian at Notre Dame Academy and holds a bachelor's degree from Harvard University and a master's degree from the University of North Carolina at Chapel Hill. Having worked in management consulting for more than 15 years, she is now excited about making an impact on her community. For more information, visit www.shsbostonsouthshore.com, email info@shsbostonsouthshore.com, or call 781-626-4800. ∞

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ELDER LAW MYTH BUSTERS

As America celebrates 250 years, it's a good time to be sure your estate plan stands the test of time

By Elizabeth A. Caruso, Esq.



Instead of busting a myth this month, as America celebrates its semiquincentennial this July 4th, I thought it would be interesting to take a historical perspective on how the Commonwealth's approach to passing wealth has evolved alongside the nation itself.

Two hundred and fifty years ago, the founders signed a document declaring that people have the right to pursue happiness and security. Estate planning is, at its core, an extension of that idea, the legal expression of everything you've worked for and everyone you love, but estate in 1776 looks quite different than what we see today.

Massachusetts has been shaping American inheritance law since before there was an America. The colony adopted the Statute of Wills as early as 1641, giving property owners the right to direct where their assets would go

upon death. By the time the Revolution was won, the Commonwealth had already established probate courts among the oldest in the nation to oversee the orderly transfer of estates.

When John Hancock, yes *that* John Hancock, died in 1793, he left behind a modest will that sparked a years-long dispute among his heirs and creditors. His widow and brother fought over the prize of the estate, the Hancock Manor at 30 Beacon Street in Boston. Even the most prominent figures of early America wrestled with the same question every Massachusetts family faces today: How do I protect what I've built?

In the 1800s, trusts became a favored tool of Boston's merchant class, giving rise to the term "Boston trustee," a nationally recognized standard of prudent, conservative trust management that influenced trust law across the country for generations.


The federal estate tax, introduced in 1916, fundamentally transformed estate planning from a matter of family wishes into a discipline of tax strategy. Massachusetts followed with its own estate tax, and suddenly attorneys, accountants, and families had to plan in concert. The irrevocable life insurance trust, the marital deduction, the bypass trust – these weren't just legal tools; they were responses to

government policy shaping how wealth moved between generations.

Massachusetts remains one of only a handful with its own separate estate tax, with an exemption of \$2 million, well below the federal threshold. That gap makes Commonwealth-specific planning essential, not optional. For families with a home, a retirement account, and modest savings, the Massachusetts estate tax is a very real concern. The good news is the tools available today – revocable living trusts, irrevocable trusts, and healthcare directives – are more flexible and accessible than anything Hancock's era could have imagined.

This Independence Day, as fireworks light up the sky over Boston Harbor, it's a fitting moment to ask: Is your plan up to date? Creating an estate plan for your assets is not just about avoiding legal red tape; it's about protecting relationships and preserving a meaningful part of your family's story. By planning ahead, you can make sure your children and grandchildren inherit your property without the headaches that come with conflict and uncertainty. An elder law attorney can help you craft a plan that will work for your family's specific circumstances.

About the Author: *Elizabeth A. Caruso, Esq. is an attorney at Legacy Legal Planning, LLC, in Norwell. She has been practicing estate planning, probate, and elder law on the South Shore for more than a decade. If this article has sparked questions for you, please feel free to reach out via phone 781-971-5900 or email client@legacylegalplanning.com to schedule a time to discuss your unique situation. ∞*




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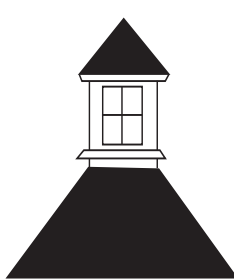
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Selling your home in the sizzle of summer requires close attention to seasonal details



By Korey Welch, Owner of Boom Realty and Senior Mortgage Broker, Loan Factory

Summer is a season of sunshine, flip-flops, backyard barbecues, and, believe it or not, home sales. While buyers may be dreaming of beach days and ice cream cones, many are also eager to find their next home before autumn arrives. If you're planning to sell, summer can be a golden opportunity – provided you don't let the heat melt your marketing strategy.

First impressions matter, and summer gives your home a chance to shine brighter than a Fourth of July fireworks display. Keep the lawn neatly trimmed, flowers watered, and walkways swept. A lush yard can make buyers fall in love before they even step through the front door.

Inside, think cool thoughts. Nothing sends buyers running faster than a stuffy, overheated house. Keep air conditioning running during showings and open blinds strategically to let in natural light without turning the living room into a greenhouse. A cool, comfortable home encourages visitors to linger – and lingering often leads to offers.

Summer is also the season of family vacations. If you're selling, flexibility is your friend. Buyers may have unpredictable schedules, so accommodating evening or weekend showings can increase your home's exposure. Yes, it may occasionally disrupt your plans, but remember: every showing is a potential step toward a successful sale.

Another summertime secret? Highlight outdoor living spaces. Decks, patios, fire pits, gardens, and pools are at their peak this time of year. Stage these areas as extensions of your home. A few comfortable chairs, colorful cushions, and a pitcher of lemonade can help buyers imagine themselves enjoying long summer evenings in their future backyard.

Don't forget the power of scent. While pumpkin spice may have to wait until fall, subtle summer aromas can make a home feel inviting. Fresh flowers, citrus notes, or the faint scent of freshly cut grass can create a welcoming atmosphere without overwhelming visitors.

Finally, price your home wisely. Summer buyers are motivated, but they're also informed. A realistic price paired with smart marketing will generate more interest than wishful thinking and crossed fingers.

Selling a home during the summer doesn't have to feel like a marathon through a heat wave. With a little preparation, flexibility, and curb appeal, you can turn the season's warmth into a hot opportunity.

Because in this market, you shouldn't just be selling your home – you should be selling smart with Boom Realty.

About the Author: *Korey Welch, Owner of Boom Realty and Senior Mortgage Broker (NMLS: 14991) with Loan Factory (NMLS: 320841), is a licensed mortgage broker/real estate broker based in Rockland. For more than two decades, Korey has been helping seniors determine the best fit. For a complimentary consultation, contact him at korey@koreywelch.com, 781-367-3351. ∞*

Navigating the Future ...

Continued from page 3

to be taken, a physician who has not returned a call, or a situation that feels increasingly fragile. The body is at work. The mind is somewhere else.

Employers feel the impact through absenteeism, reduced productivity, turnover, and burnout. Families feel it through strained relationships and declining well-being. Caregivers feel it everywhere. Dr. Kfoury adds: "Most significant is that the demands of caregiving often leave little opportunity to process their own emotions, resulting in chronic stress, exhaustion, anxiety, sadness, and feelings of isolation. Many caregivers report experiencing conflicting emotions, including grief, frustration, guilt, resentment, and profound love and commitment toward the individual in their care."

The reality is that caregiving is no longer just a family issue. It is a workforce issue, a healthcare issue, and an economic issue.

America's family caregivers provide nearly 50 billion hours of unpaid care annually, work valued at more than one trillion dollars. Without them, the healthcare system would struggle to function.

Yet many caregivers continue to suffer in silence. Recognition is often the first step toward relief.

Understanding that caregiving naturally evolves from privilege or obligation to burden helps families prepare for changing circum-

stances. Recognizing the signs of trauma allows caregivers to seek support before reaching a breaking point. No caregiver should feel obligated to do everything alone. Asking for help is not failure. Setting limits is not selfish. Protecting your own health is not abandoning the person you love.

The most sustainable caregiving plans are built around support, communication, and realistic expectations. Families that acknowledge challenges early are better positioned to preserve careers, strengthen relationships, and improve outcomes for older adults.

Most importantly, they remember a truth that caregivers often forget. Providing care for someone you love should never require sacrificing yourself in the process.

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About the Authors: *Mark Friedman is the owner and Chief Education Officer of Senior Helpers Boston and South Shore. Passionate about seniors and healthcare, the goal of his agency is to change the trajectory of aging for his clients and their families first by delivering an exceptional home-care experience in a combination of highly trained and high-touch caregivers, and second by providing education and guidance with and connection to resources and services in the 43 communities his company serves. Contact Mark at MFriedman@SeniorHelpers.com or visit www.SeniorHelpers-Boston.com.*

Dr. Tara Kfoury is the founder of Boston-based RIVER Educational Consulting, and a transformative behavioral specialist dedicated to supporting the mental emotional, and therapeutic well-being of children, adolescents, veterans, and first responders and their families. She helps individuals recognize and overcome mental health and behavioral challenges that hinder success in daily life, empowering them to navigate their experiences, build resilience, and create a meaningful path forward.

Bob Stephen has more than 30 years of experience with healthcare and family caregiving and supported millions of family caregivers through his role leading family caregiving efforts at a leading aging-focused nonprofit. ∞



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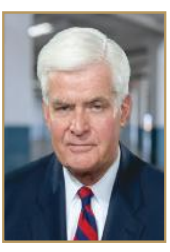
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Across the South Shore!



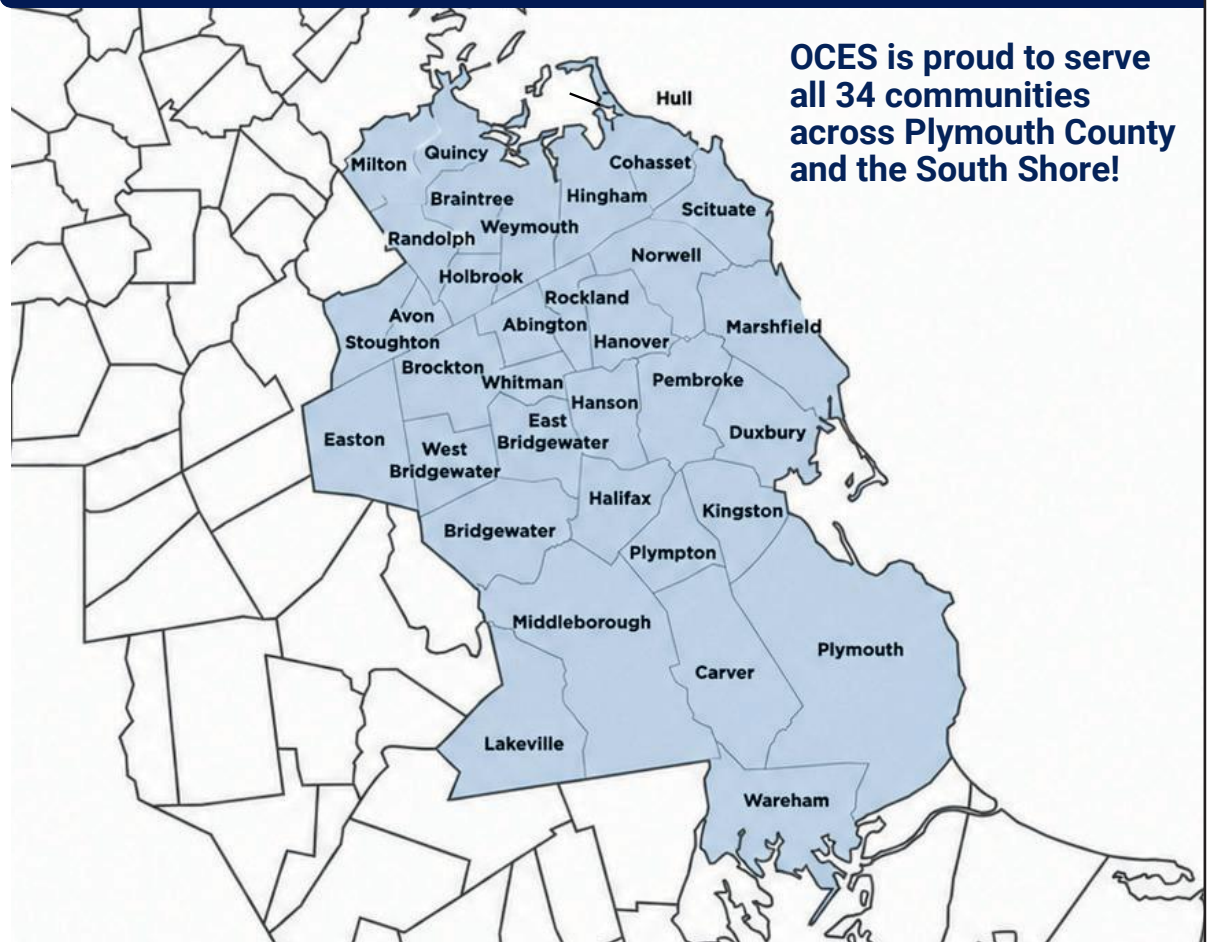
DON'T SEE A PROGRAM LISTED THAT YOU ARE IN NEED OF?

CALL OCES we will direct you to the right person!

OCES SERVICES

- Adult Family Care
- Community Transition Liaison Services
- Consumer Directed Care
- Home Care Program
- Housing Programs
- Information & Referral
- Options Counseling
- Money Management
- Nutrition Program
- One Care Services
- Private Care Coordination
- Protective Services
- Senior Care Options
- Volunteer Programs

OCES SERVICE AREA



OCES is proud to serve all 34 communities across Plymouth County and the South Shore!

The above listing includes the **CORE** programs and services that we provide. This is not a comprehensive listing of all services that will be offered.



Call Us Today
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We will direct you to the **right** person!



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